

# MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO

FILED DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT										
	DID	DEP	DID	DEP	DID	DEP		DID	DEP	DID	DEP	DID	DEP	DID	DEP
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